It is form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 02/25/2007	Address: 10901 GEOPGE TOWN ?	į
Case #: 43F24754	CO:WACBUS, IN. ATZO	
COUNTY: BARTHOLONEW		
Type of Laboratory Seizure (check one)	Seizure Location (check all that apply)	
Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)	☐ Residence ☐ Hotel/Motel ☐ Outbuilding ☐ Open - No Structure ☐ Vehicle ☐ Other:	
items Found: Location (bedroom, kitchen, open at	r, <u>etc)</u>	
(check all that apply) Lithium/Ammonia Reaction(s):		
Red Phosphorous/Iodine Reaction(s):		
X Flammable Solvents: IJ GARAGE.		
Water Reactive Metal (Lithium);		
Auhydrous Ammonia: A J GARAGE.		
Hydrochloric Acid Gas Generator(s): 1.0 GA	SPACE .	
Corrosive Acid: IJ GARAGE.		
Corrosive Base:		
Other (item and location):	····	
Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services	Investigative Information Description: Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:	Ţ
This report is to be faxed to the following agenc	_	
Fire Department: HARRISCH TOWNSEST P	Fax: HAND DELIVERED - /	
Health Department: BACETHOLOMENCO.	Fax: 812-379-1040	
Child Protection Service: 1/A	Fax: LIA	
For further information regarding this methamphet investigating Officer:	amine laboratory, contact Phone 812 - 522 - 1441	
4 This forms is to be found to 12 TV as the control of the cont		

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.